

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | Daniel | | 04-05-01 |
| O.I.P.E. CLASSIFIER | | 59 | (SP1) |
| FORMALITY REVIEW | H-T | 913 | 06/01/01 |
| RESPONSE FORMALITY REVIEW | Y | 905 | 5/19/01 |

INDEX OF CLAIMS

Rejected N Non-elected
 Allowed I Interference
 (Through numeral)... Canceled A Appeal
 Restricted 0 Objected

| Claim | Date | Final | Original |
|-------|---------|-------|----------|
| 1 | 9/17/01 | ✓ | |
| 2 | | ✓ | |
| 3 | | ✓ | |
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| 33 | | ✓ | |
| 34 | | ✓ | N |
| 35 | | ✓ | N |
| 36 | | ✓ | N |
| 37 | | ✓ | N |
| 38 | | ✓ | N |
| 39 | | ✓ | N |
| 40 | | ✓ | N |
| 41 | | ✓ | N |
| 42 | | ✓ | N |
| 43 | | ✓ | N |
| 44 | | ✓ | N |
| 45 | | ✓ | N |
| 46 | | ✓ | |
| 47 | | ✓ | |
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| Claim | Date | Final | Original |
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| Claim | Date | Final | Original |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

6/2

5C-485
9-17-01